Case No.: Act 51A

UNITED STATES		FILE NO.						
AND POWER OF ATTORNEY FOR PATENT APPLICATION						FILE NO. 345, 0028		
As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below next to my name; that I verily believe that I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Tetrahydropyridoindole derivatives								
the specification of which is attached hereto, unless the following box is checked:								
Swas filed on March 7, 2005 as PCT International patent application number PCT/EP2005/002362 and was amended on (if any).								
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose all information known to be material to patentability in accordance with Title 37, Code of Federal Regulations,								
§1.56. I hereby claim priority benefits under Title 35, United States Code §119 of any foreign application(s) for patent or inventor's certificate or United States provisional application(s) listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:								
Prior Foreign or Provisional Applicat COUNTRY					PRIORITY CLAIMED			
COUNTRI	ATTECATION	(day, month, yet		th, year)	UNDER 35 U.S.C. § 119			
EP	PCT/EP200	PCT/EP2004/002493 March		11, 2004		⊠YES □NO		
						□YES □NO		
						□YES □NO		
I hereby claim the benefit under I matter of each of the claims of this at Title 35. United States Code, §112. I Federal Regulations, §1.56 which becthis application.	itle 35, United States Coplication is not disclose acknowledge the duty that ame available between	code, §120 of any U ed in the prior Unite to disclose informati the filing date of the	nited States application d States application in on which is material to e prior application and	n(s) listed the manne patentab the nation	below and or provided lify as definal or PCT	, insofar as the subject I by the first paragraph of ined in Title 37, Code of international filing date of		
UNITED STATES APPLICATION NUMBER	DATE OF FILING (day, month, year)			STATUS (patented, pending, abandoned)				
						-		
I hereby appoint customer no. 32172, DICKSTEIN, SHAPIRO, MORIN & OSHINSKY, LLP, as attorneys with full power of substitution and revocation to prosecute this application, to transact all business in the Patent & Trademark Office connected therewith and to receive all correspondence.								
SEND CORRESPONDENCE TO: DICKSTEIN, SHAPIRO, MORIN & OSHINSKY, LLP 1177 Avenue of the Americas, 41st Floor New York, NY 10036-2714 DIRECT TELEPHON (212) 835-1400						HONE CALLS TO:		
In the event that the filing date and/or Application No. are not entered above at the time I execute this document, and if such information is deemed necessary, I hereby authorize and request my attorneys/agent(s) to insert above the filing date and/or Application No. of said application.								
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of								
the application or any patent issued the	ereon.							
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☑ CONTINUED ON PAGE 2

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POST OFFICE ADDRESS							
FULL NAME OF SEVENTH JOINT INVENTOR, IF ANY INVENTOR'S SIGN.			DATE				
RESIDENCE (City and either State or Foreign Country)			COUNTRY OF CITIZENSHIP				
POST OFFICE ADDRESS							
FULL NAME OF EIGHTH JOINT INVENTOR, IF ANY	INVENTOR'S SIGNATURE		DATE				
RESIDENCE (City and either State or Foreign Country)	COUNTRY OF CITIZENSHIP						
POST OFFICE ADDRESS							
FULL NAME OF NINTH JOINT INVENTOR, IF ANY	INVENTOR'S SIGNATURE		DATE				
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